

Work Order ID 88088

88088

Page 1

July-25-12 1:29:33 PM

Item ID: D212-725-1-925

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: tube ass'y

Stop

NS2

Start Date: 7/25/12 Start Qty: 2.00

2

Cust Item ID:

Required Date: 8/03/12 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr	
----------	--------------	--

D212-725-1

Rev B

101

0.00

101

Purchasing

Purchasing

Memo

ISSUE PO 17539
MAKE PER DRWG D4239
SUPLIER: CINTUBE

h 120725

102

Receive & Inspect for Damage & Mat'l Certs

0.00

102

Packaging

Packaging

Memo

0.00

11/08/12

103

QC6- Inspect dimensions to drawing

0.00

103

QC

Quality Control

Memo

0.00

DAS 16 5 11/08/12

11/08/12

NCR: Yes / No

DQA: Date:

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS										
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other									
Part No. _____																
NCR No. _____																
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector							
Doc/Data																
Equip/Tooling																
Operator																
Material																
Setup																
Other																
Process																
Supplier																
Training																
Unapproved																
FAULT CATEGORY																
Landing Gear				General												
Bending	General			Bend	General			Grain	General			Ovalized	General			Pressure/Forced
Centre Not Concentric to O/S				BOM/Route				Hardware				Over/Under tolerance				Temperature/Cure
Cracks				Broken/Damaged				Inspection Incomplete				Part Incorrect				Weld
Crushed/Crimped.				Burrs				Instructions Incomplete/Unclear				Part Lost/Missing				Wrong Stock Pulled
Cuffs				Contamination				Maintenance				Part Moved				
Heat Treat				Countersink				Mislabeled				Positioned Wrong				
Inspection Strip in Tube				Cut Too Short				Misread				Power Loss/Surge				
Ripples in Bend				Drill Holes				Offset								Other
Torque Waves in Extrusion				Drawing				Out of Calibration								
Turning Sequence				Finish				Out of Sequence								
Wave/Twist in Tube				Folio				Outside Dimensions								

Work Order ID 88088

88088

Page 2

July-25-12 1:29:33 PM

Item ID: D212-725-1-925

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: tube ass'y

Stop

NS2

Start Date: 7/25/12 Start Qty: 2.00

2

Cust Item ID:

Required Date: 8/03/12 Req'd Qty: 2.00

2

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling: Date:

Run Start

NR1

QC:

Date:

SPC (Y/N): Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

120

120

Packaging

Packaging

Identify as per dwg & Stock Location: 368

0.00

2 Est 12/9/4

130

130

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

12/9/5 JJ

Memo

0.00

ME
12-09-04

NCR: Yes / No

DQA: Date: .

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Date:

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	

Picklist Print

July-25-12 1:29:33 PM

Page 1

Work Order ID: 88088

Parent Item: D212-725-1-925

Start Date: 7/25/12

Required Date: 8/03/12

Parent Item Name: tube ass'y

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP Rev:A New Issue 07-04-19 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
AN818-16J Nut		Purchased	No			100	Each	4.0000	2	4			

Nur

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST326	4	
119360	1	
119518	3	

(H) 122545 RL

D212-725-1-925P

tube ass'y

M304TR1.000W.049

304 RD Tube 1.00 x .049W

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT018	49.470015	
117598	0.000015	
120654	49.47	438+34+88/23

MS20819-16.I

Sleeve

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST299	2	_____
119356	2	_____

40 122545

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>			Engineering <input type="checkbox"/>		
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>			Quality <input type="checkbox"/>		
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>			Other <input type="checkbox"/>		
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
Doc/Data	<input type="checkbox"/>										
Equip/Tooling	<input type="checkbox"/>										
Operator	<input type="checkbox"/>										
Material	<input type="checkbox"/>										
Setup	<input type="checkbox"/>										
Other	<input type="checkbox"/>										
Process	<input type="checkbox"/>										
Supplier	<input type="checkbox"/>										
Training	<input type="checkbox"/>										
Unapproved	<input type="checkbox"/>										
FAULT CATEGORY											
Landing Gear				General							
				Bending <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>				
Centre Not Concentric to O/S				BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>				
Cracks <input type="checkbox"/>				Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>				
Crushed/Crimped. <input type="checkbox"/>				Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>				
Cuffs <input type="checkbox"/>				Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>					
Heat Treat <input type="checkbox"/>				Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>					
Inspection Strip in Tube <input type="checkbox"/>				Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>					
Ripples in Bend <input type="checkbox"/>				Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>						
Torque Waves in Extrusion <input type="checkbox"/>				Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>						
Turning Sequence <input type="checkbox"/>				Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>						
Wave/Twist in Tube <input type="checkbox"/>				Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>						

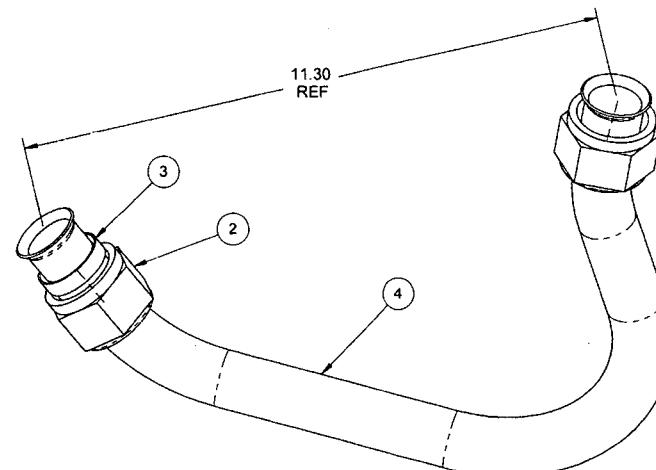
DART AEROSPACE LTD	Work Order:	D712-725-1-131
Description: valve Assembly	Part Number:	88086
Inspection Dwg: D4239 Rev: A		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

Measured by:	Audited by: DAS	Preliminary Approval:
Date:	Date: 16-08-17 (08/13)	Date:

Rev	Date	Change	Revised by	Approved
E	10.04.14	Added preliminary approval	KJ	

ITEM	QTY	PART NUMBER	DESCRIPTION
1	X	D212-725-1-925	TUBE ASSEMBLY
2	2	AN818-16J	NUT
3	2	MS20819-16J	SLEEVE
4	1	D212-725-1-131	TUBING



D212-725-1-925 TUBE ASSEMBLY

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 1.39 lbs

WJ 88888

A	NEW ISSUE	RF	11.02.24
REV.	DESCRIPTION	BY	DATE
DESIGN	DC	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>✓</i>	REV. A	
MFG. APPR.	<i>✓</i>	DRAWING NO. D4239	
APPROVED	<i>✓</i>	SHEET 1 OF 2	
DE APPR.	<i>✓</i>	TITLE TUBE ASSEMBLY	
DATE	11.02.24	SCALE NTS	

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WRITTEN PERMISSION FROM DART AEROSPACE LTD

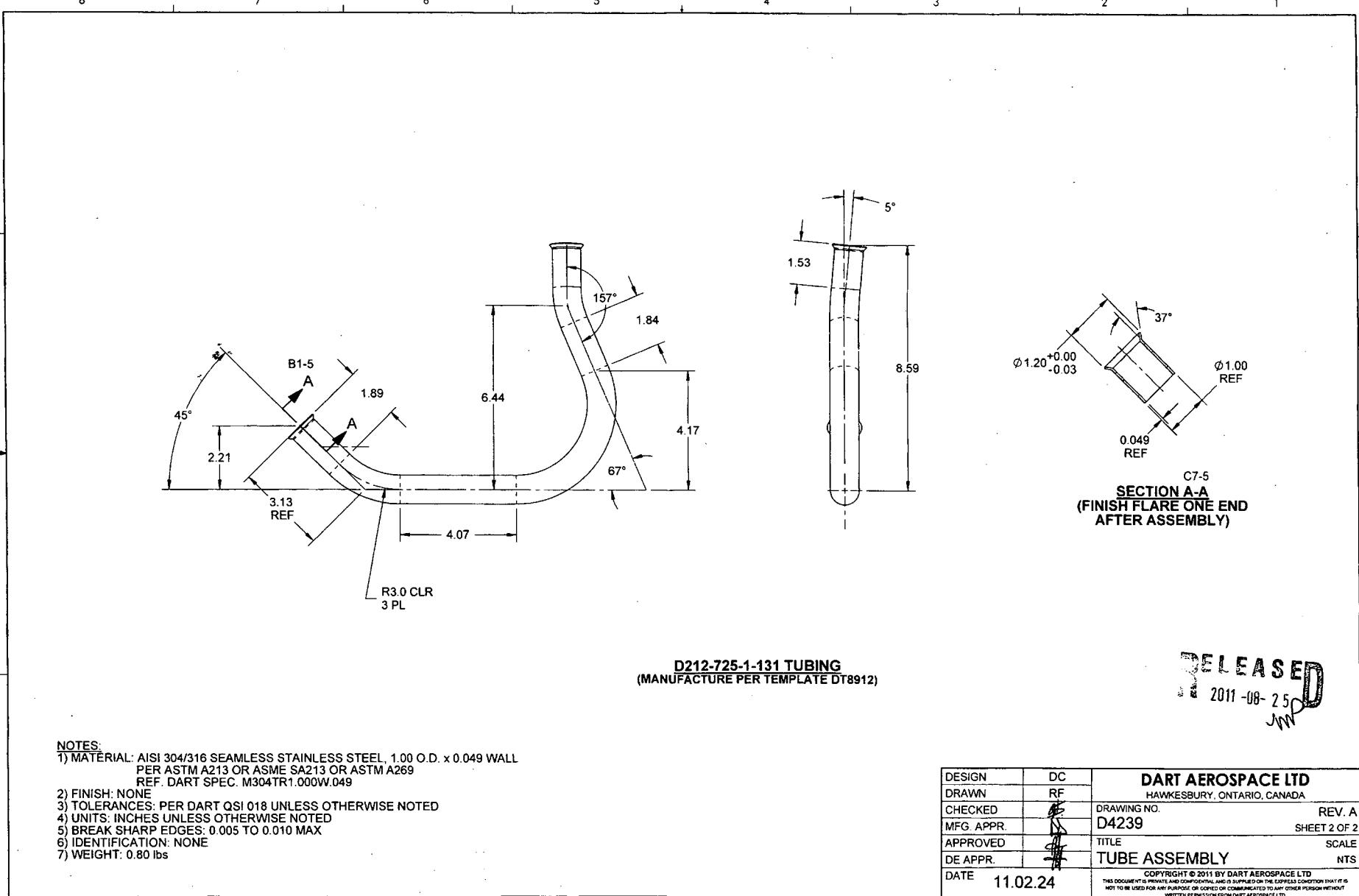
NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS							
Part No. _____		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>					
NCR No. _____		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>					
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>					
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
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Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other			<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled



NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
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			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector
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Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>			
Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>							
Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>							
Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>							
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>								
Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>								
Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>								
Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>									
Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>									
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>									
Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>									



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO17539**

Purchase Order Date 7/25/12
PO Print Date 7/25/12

Page Number 1 of 1

Order From : VC-CIN001

CINTUBE LTEE
333 ST-JOSEPH BLVD
LACHINE, QC H8S 2K9
CA

Contact Name		Buyer	Linda Lacelle
Vendor Phone	514 634 3592	Requisition Nbr	
Vendor Fax	514 636 3336	Tax Resale Nbr	10127-2607
Vendor Account Nbr		Terms	Net 30
		Currency	CAD
		FOB	Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Line Nbr	Reference Revision ID	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	D212-725-1-925P	tube ass'y	8/03/12 Yes	✓ 2.00 Each		\$207.5000	\$415.00

Special Inst: PER DRWG D4239 REV.A
ALL PARTS SUPPLIED BY DART

PO Total: \$415.00

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required - YES NO

Change Nbr: 1

Change Date: 7/25/12

M-120861

CINTUBE

LTEE/LTD

CLIENT:
DART AEROSPACE LTD.
1270 ABERDEEN ST.

HAWKSLEY
ON K6A 1K7

EXPED. A/TO :
SAME

333 BOUL. ST-JOSEPH, BUILDING # 105
LACHINE, QUEBEC
H8S 2K9
TEL: (514) 634-3592
FAX: (514) 636-3336 / 8625

1250 MATHESON BLVD. EAST
MISSISSAUGA, ONTARIO
L4W 1R2
TEL: (905) 625-190
FAX: (905) 625-1500

Rep: MICHELLE DION

CLIENT

BON. LIVR.:

RELACHE

M-120861

PACK. SLIP

RELEASE

DATE:

25-JUIL-12

COMMANDE #:

PO17539

ORDER #:

CONTACT PHONE #: (613) 632-9577 EXT.#:
FAX #: (613) 632-1053

CLIENT NO.		MAT'L PAR / MAT'L BY	REFERENCE	MODE DE PAIEMENT / TERMS OF PAYMENT		
MDAR72		CLIENT		1.5 % - 10 DAYS / NET 30		
		TRANSPORT		DATE LIV. / DELIV. DATE		CONTACT
		PUROLATOR COLLECT #7684382		7 A/TO 10 JOURS/DAYS		LINDA LACELLE
QUANT	EXP.	DIMENSION / SIZE	EP / WALL	DECRIP. MAT'L. / MAT'L DESCRIPT.	DEG.	RAY. / RAD.
2	2	1 OD	0.049	PART NO. DART D4239 TUBE SS/304/316L	3 BENDS	3 CLR
						SEE DRWG: D4239
						ALL FUNCTIONS

Notes:

CATEGORIE ISO
ISO CATEGORY1 2 3

ASME

EXPEDIE PAR / SHIPPED BY:

DATE CLIENT AVIS / ADV.:

CONTACT:
DATE: 25-JUL-12CERTIFICAT D'ANALYSE
MILL TEST CERTIFICATEOUI
YESLETTRE DE CONFORMITE
LETTER OF COMPLIANCEOUI
YES

PAR/BY:

DATE:

CINTUBE

LTD.
LTÉE.

CINTRAGE DE PRÉCISION, DE TUBES, TUYAUX, CORNIÈRES, POUTRES,
PROFILÉS EN "U", ET SERPENTINS.
MANUFACTURER DE GÉNÉRATRICE À VAPEUR, ÉLÉMENT CHAUFFANT,
RÉCUPÉRATEUR DE CHALEUR, ÉCONOMISEUR ETC.

PRECISION BENDING OF TUBES, PIPES, ANGLES, BEAMS, CHANNELS, COILS,
MANUFACTURERS OF STEAM GENERATORS, THERMAL FLUID HEATERS,
WASTE HEAT RECOVERY UNITS, ECONOMIZERS.

333 BOUL. ST-JOSEPH, LACHINE, QUÉBEC H8S 2K9
TÉLÉPHONE: (514) 364-6426 FAX NO: (514) 636-3336

LETTER OF COMPLIANCE

Client/Customer DART AEROSPACE Date: AUG. 28 / 2012

N° de commande du client/Customer order No: PO 17539

Notre n° de feuille de route/Our order No: 120861

Notre n° de dessin/Our drawing No: —

Description/Customer drawing No: D 4239 rev. A

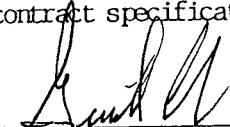
Nom de la pièce/Part Name: TUBE ASSEMBLY

2 pieces

La présente est pour certifier que le matériel ci-haut mentionné se conforme aux exigences contractuelles de qualité et/ou de la confirmation de la commande, qu'il a été produit, inspecté et testé selon les spécifications standards applicables de notre programme de contrôle de la qualité, du contrat et du(des) dessin(s).

This is to certify that the material covered by this document conforms to the quality requirements of the purchase order or contract, that the material has been produced, verified and tested according to applicable standard specifications listed in our quality control procedures, contract specifications and/or drawing(s).

Signé par/Signed by:



G. HOULE pour B. OVERBURY

Directeur des services techniques/Technical Services Director

Pour la Compagnie Cintube Ltée/On behalf of Cintube Ltd.

F 10.4.5